



Region 2

**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

12/01/2009

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:	NJD986615102
INSTALLATION NAME:	MERCK & CO INC
INSTALLATION ADDRESS:	1 MERCK DR WHITEHOUSE STATION, NJ 08889
MAILING ADDRESS:	PO BOX 100 - WS2DE-20 WHITEHOUSE STATION, NJ 08889

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-4437**

**TO: MERCK & CO INC
or Current Occupant**
**ATTN: RICHARD ALDANA
PO BOX 100 - WS2DE-20
WHITEHOUSE STATION, NJ, 08889**

**SEND COMPLETED
FORM TO:**The Appropriate State or
EPA Regional Office.

United States Environmental Protection Agency

RCRA SUBTITLE C SITE IDENTIFICATION FORM**1. Reason for
Submittal
(See instructions
on page 13.)**MARK ALL BOX(ES)
THAT APPLY**Reason for Submittal:**

- ☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)
- ☒ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)
- ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application
- ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)
- ☐ As a component of the Hazardous Waste Report

**2. Site EPA ID
Number (page 14)****EPA ID Number**

N J D | 9 | 8 | 6 | 6 | 1 | 5 | 1 | 0 | 2 |

**3. Site Name
(page 14)**

Name: Merck & Co Inc.

NJX 000 332 319

**4. Site Location
Information
(page 14)****Street Address:** One Merck Drive**City, Town, or Village:** Whitehouse Station**State:** NJ**County Name:** Hunterdon County**Zip Code:** 08889**5. Site Land Type
(page 14)****Site Land Type:** ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other**6. North American
Industry
Classification
System (NAICS)
Code(s) for the
Site (page 14)****A.**

3 | 2 | 5 | 4 | 1 | 2 |

B.

3 | 2 | 5 | 4 | 1 | 1 |

C.

5 | 5 | 1 | 1 | 1 | 4 |

D.

| | | | | |

**7. Site Mailing
Address
(page 15)****Street or P. O. Box:** One Merck Drive, P O Box 100 - WS2DE-20**City, Town, or Village:** Whitehouse Station**State:** New Jersey**Country:** USA**Zip Code:** 08889**8. Site Contact
Person
(page 15)****First Name:** Richard**MI:****Last Name:** Aldana**Phone Number:** 908 423 2102 **Extension:****Email address:**
richard_aldana@merck.com**9. Operator and
Legal Owner
of the Site
(pages 15 and 16)****A. Name of Site's Operator:**
Merck Sharp & Dohme Corp**Date Became Operator (mm/dd/yyyy):**
11/03/2009**Operator Type:** ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other**B. Name of Site's Legal Owner:**
Merck Sharp & Dohme Corp**Date Became Owner (mm/dd/yyyy):**
11/03/2009**Owner Type:** ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

11. Description of Hazardous Wastes (See instructions on page 21.)

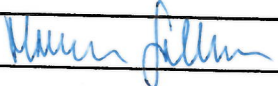
A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D003	P081	D009	U134	D007	

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 21.)

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	MAURIZIO SOLLAZZO, Exec. Director of Global Site Services	Nov. 11, 2009

EPA ID NO: N J D 9 8 6 6 1 5 1 0 2

OMB#: 2050-0028 Expires 06/30/2009

9. Legal Owner
(Continued)
Address

Street or P. O. Box: One Merck Drive

City, Town, or Village: Whitehouse Station

State: New Jersey

Country: USA

Zip Code: 08889

10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

Y ☒ N ☐ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)
of non-acute hazardous waste; or☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)
of non-acute hazardous waste; or☒ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)
of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☒ d. United States Importer of Hazardous WasteY ☐ N ☒ e. Mixed Waste (hazardous and radioactive) GeneratorY ☐ N ☒ 2. Transporter of Hazardous WasteY ☐ N ☒ 3. Treater, Storer, or Disposer of
Hazardous Waste (at your site) Note: A
hazardous waste permit is required for this
activity.Y ☐ N ☒ 4. Recycler of Hazardous Waste (at your
site)Y ☐ N ☒ 5. Exempt Boiler and/or Industrial Furnace
If "Yes", mark each that applies.☐ a. Small Quantity On-site Burner
Exemption☐ b. Smelting, Melting, and RefiningY ☐ N ☒ 6. Underground Injection Control

B. Universal Waste Activities

Y ☐ N ☒ 1. Large Quantity Handler of Universal Waste (accumulate
5,000 kg or more) [refer to your State regulations to
determine what is regulated]. Indicate types of universal
mark all boxes that apply:

Manage

a. Batteries ☒b. Pesticides ☐c. Mercury containing equipment ☐d. Lamps ☒e. Other (specify) ☐f. Other (specify) ☐g. Other (specify) ☐Y ☐ N ☒ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.


Y ☐ N ☒ 1. Used Oil Transporter

If "Yes", mark each that applies.

☐ a. Transporter☐ b. Transfer FacilityY ☐ N ☒ 2. Used Oil Processor and/or Re-refiner
If "Yes", mark each that applies.☐ a. Processor☐ b. Re-refinerY ☐ N ☒ 3. Off-Specification Used Oil BurnerY ☐ N ☒ 4. Used Oil Fuel Marketer

If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of
Off-Specification Used Oil to
Off-Specification Used Oil Burner☐ b. Marketer Who First Claims the
Used Oil Meets the Specifications

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		
1. Reason for Submittal (See instructions on page 13.) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: <input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #____) <input type="checkbox"/> As a component of the Hazardous Waste Report		
2. Site EPA ID Number (page 14)	EPA ID Number N J X 0 0 0 3 3 2 3 7 9		
3. Site Name (page 14)	Name: Merck & Co Inc.		
4. Site Location Information (page 14)	Street Address: One Merck Drive		
	City, Town, or Village: Whitehouse Station	State: NJ	
	County Name: Hunterdon County	Zip Code: 08889	
5. Site Land Type (page 14)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)	A. 3 2 5 4 1 2	B. 3 2 5 4 1 1	
	C. 5 5 1 1 1 4	D. 	
7. Site Mailing Address (page 15)	Street or P. O. Box: One Merck Drive, P O Box 100, WS2DE-20		
	City, Town, or Village: Whitehouse Station		
	State: New Jersey		
	Country: USA	Zip Code: 08889	
8. Site Contact Person (page 15)	First Name: Richard	MI:	Last Name: Aldana
	Phone Number: 908 423 2102 Extension:		Email address: richard_aldana@merck.com
9. Operator and Legal Owner of the Site (pages 15 and 16)	A. Name of Site's Operator: Merck Sharp & Dohme Corp		Date Became Operator (mm/dd/yyyy): 11/03/2009
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	B. Name of Site's Legal Owner: Merck Sharp & Dohme Corp.		Date Became Owner (mm/dd/yyyy): 11/03/2009
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

9. Legal Owner (Continued) Address	Street or P. O. Box: One Merck Drive		
	City, Town, or Village: Whitehouse Station		
	State: New Jersey		
	Country: USA	Zip Code: 08889	

10. Type of Regulated Waste Activity
 Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 17 to 20.)

A. Hazardous Waste Activities
 Complete all parts for 1 through 6.

☒ ☐ **1. Generator of Hazardous Waste**
 If "Yes", choose only one of the following - a, b, or c.

☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or

☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or

☒ c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities.

☐ ☒ d. United States Importer of Hazardous Waste

☐ ☒ e. Mixed Waste (hazardous and radioactive) Generator

☐ ☒ **2. Transporter of Hazardous Waste**

☐ ☒ **3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note: A hazardous waste permit is required for this activity.

☐ ☒ **4. Recycler of Hazardous Waste (at your site)**

☐ ☒ **5. Exempt Boiler and/or Industrial Furnace**
 If "Yes", mark each that applies.

☐ a. Small Quantity On-site Burner Exemption

☐ b. Smelting, Melting, and Refining

☐ ☒ **6. Underground Injection Control**

B. Universal Waste Activities

☐ ☒ **1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste that apply:**

	<u>Manage</u>
a. Batteries	<input checked="" type="checkbox"/>
b. Pesticides	<input type="checkbox"/>
c. Mercury containing equipment	<input type="checkbox"/>
d. Lamps	<input checked="" type="checkbox"/>
e. Other (specify)	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>

☐ ☒ **2. Destination Facility for Universal Waste**
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities
 Mark all boxes that apply.

☐ ☒ **1. Used Oil Transporter**
 If "Yes", mark each that applies.

☐ a. Transporter

☐ b. Transfer Facility

☐ ☒ **2. Used Oil Processor and/or Re-refiner**
 If "Yes", mark each that applies.

☐ a. Processor

☐ b. Re-refiner

☐ ☒ **3. Off-Specification Used Oil Burner**

☐ ☒ **4. Used Oil Fuel Marketer**
 If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner

☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

EPA ID NO: N J X 0 0 0 3 3 2 3 7 9

OMB#: 2050-0028 Expires 06/30/2009

11. Description of Hazardous Wastes (See instructions on page 21.)

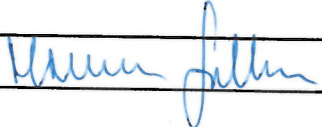
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12. Comments (See instructions on page 21.)

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 21.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	MAURIZIO SOLLAZZO, Exec. Director of Global Site Services	Nov 11, 2009



November 12, 2009

CERTIFIED MAIL# 7007 2560 0002 2693 5073
RETURN RECEIPT REQUESTED

United States Environmental Protection Agency - Region II
DEPP – RCRA Program Branch
Attn: RCRA Notifications
290 Broadway, 22nd Floor
New York, New York 10007-1866

Re: RCRA Waste ID No.NJD986615102 & NJX000332379
Merck & Co., Inc. - Whitehouse Station Facility
Notification of Name Change and of Parent Company

Dear Sir or Madam:

I am writing on behalf of Merck & Co., Inc., the holder of the above noted RCRA Waste ID numbers, to advise the United State Environmental Protection Agency (USEPA) that, effective November 3, 2009, Merck & Co., Inc. changed its name to Merck Sharp & Dohme Corp. I am enclosing with this letter a copy of the Certificate of Adoption of Restated Certificate of Incorporation of Merck & Co. Inc. (ID No 5934701000) evidencing this name change.

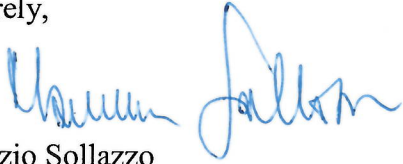
Although the company changed its name, the tax identification number of the RCRA Waste ID number holder (22-1109110) did not change. The owner of the RCRA Waste ID number did not change. In addition, the operations at the facility did not change.

We were advised by the USEPA RCRA Notification Section that we should submit EPA Form 8700-12 to notify the USEPA of this name change. Enclosed are completed 8700-12 forms for both RCRA Waste ID numbers providing such notification and including the other information required by the forms.

In addition to the change in the name of the RCRA Waste ID number holder to Merck Sharp & Dohme Corp., we also advise the USEPA that, also effective November 3, 2009, Merck Sharp & Dohme Corp. became a wholly-owned subsidiary of a parent company re-named Merck & Co., Inc. At the time of the merger, the prior shareholders of the RCRA Waste ID number holder own a majority of the shares of the new parent company, Merck & Co., Inc. and the members of the Board of Directors of the RCRA Waste ID number-holder have joined the Board of the parent company and constitute a majority of that company's Board of Directors.

If you have any questions concerning this name change or addition of a new parent company of the RCRA Waste ID number holder, please contact Mr. Yat Yeung at (732) 594-7498.

Sincerely,



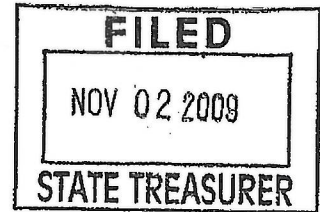
Maurizio Sollazzo
Executive Director of Global Site Services

Enclosures

APR 13 2006
10:11:06

20091113 AM11:06

**CERTIFICATE OF ADOPTION
OF
RESTATED CERTIFICATE OF INCORPORATION
OF
MERCK & CO., INC.
(ID Number: 5934701000)**



Merck & Co., Inc., a corporation organized and existing under the laws of the State of New Jersey (the "Corporation"), to amend and restate its Certificate of Incorporation pursuant to Section 14A:9-5 of the New Jersey Business Corporation Act (the "NJBCA"), hereby certifies as follows:

FIRST: The name of the Corporation is Merck Sharp & Dohme Corp.

SECOND: The Restated Certificate of Incorporation attached hereto (the "Restated Certificate") was adopted by the shareholders of the Corporation on August 7, 2009 as part of their approval of the Agreement and Plan of Merger, dated as of March 8, 2009, by and among the Corporation, Schering-Plough Corporation, SP Merger Subsidiary One, Inc. (formerly known as Blue, Inc.), and SP Merger Subsidiary Two, Inc. (formerly known as Purple, Inc.), and pursuant to Section 14A:10-1 and Section 14A:10-4.1 of the NJBCA.

THIRD: The number of shares entitled to vote on the adoption of the Restated Certificate was 2,108,780,449 shares of Common Stock, of which 1,399,114,521 voted for the Restated Certificate as part of their approval of the Agreement and Plan of Merger, and 5,686,148 voted against the Restated Certificate. No shares of any class or series were entitled to vote thereon as a class.

FOURTH: This Certificate of Adoption shall become effective on November 3, 2009 at 4:02 p.m.

IN WITNESS WHEREOF, the Corporation has caused this Certificate to be duly executed as of the 2nd day of November, 2009.

MERCK & CO., INC.

By: Celia A. Colbert
Name: Celia A. Colbert
Title: Senior Vice President, Secretary
and Assistant General Counsel

RESTATED CERTIFICATE OF INCORPORATION

OF

MERCK & CO., INC.
(ID Number: 5934701000)

Merck & Co., Inc., a corporation organized and existing under the laws of the State of New Jersey (the "Corporation"), restates and integrates its Restated Certificate of Incorporation, as heretofore amended, and also substantively amends such Restated Certificate of Incorporation, to read in full as herein set forth:

FIRST: The name of the Corporation is Merck Sharp & Dohme Corp.

SECOND: The purpose for which the Corporation is organized is to engage in any activity within the purposes for which corporations may be organized under the New Jersey Business Corporation Act.

THIRD: The total number of shares of capital stock which the Corporation shall have authority to issue is 100 shares of common stock, \$0.01 par value per share. Shares of capital stock of the Corporation may be issued by the Corporation from time to time for such legally sufficient consideration as may be fixed from time to time by the Board of Directors.

FOURTH: In furtherance and not in limitation of the general powers conferred by the laws of the State of New Jersey, the Board of Directors is expressly authorized to make, alter or repeal the bylaws of the Corporation, except as specifically stated therein.

FIFTH: The Corporation reserves the right to amend, alter, change or repeal any provision contained in the Certificate of Incorporation, in the manner now or hereafter prescribed by statute, and all rights conferred upon shareholders herein are granted subject to this reservation.

SIXTH: The Corporation shall, to the full extent permitted by the New Jersey Business Corporation Act, as it may be amended from time to time, indemnify all persons whom it may indemnify pursuant thereto.

SEVENTH: No director or officer of the Corporation shall be personally liable to the Corporation or its shareholders for damages for breach of any duty owed to the Corporation or its shareholders, except that such provision shall not relieve a director or officer from liability for any breach of duty based upon an act or omission (a) in breach of such person's duty of loyalty to the Corporation or its shareholders, (b) not in good faith or involving a knowing violation of law or (c) resulting in receipt by such person of any improper personal benefit. As used in this article, an act or omission in breach of a person's duty of loyalty means an act or omission which that person knows or believes to be contrary to the best interests of the Corporation or its shareholders in connection with a matter in which he has a material conflict of interest.

EIGHTH: Except as otherwise required by the laws of the State of New Jersey, the shareholders and directors shall have the power to hold their meetings and to keep the books, documents, and papers of the Corporation outside of the State of New Jersey, and the Corporation shall have the power to have one or more offices within or without the State of New Jersey, at such places as may be from time to time designated by the bylaws or by resolution of the shareholders or directors. Elections of directors need not be by ballot unless the bylaws of the Corporation shall so provide.

NINTH: The address of the Corporation's current registered office in the State of New Jersey is 820 Bear Tavern Road, City of West Trenton, County of Mercer, State of New Jersey, 08628, and the name of the Corporation's registered agent at such address is The Corporation Trust Company.

TENTH: The number of directors constituting the current Board of Directors of the Corporation is fifteen (15). The names and addresses of said directors are as follows:

Leslie A. Brun	435 Devon Park Drive, 700 Building Wayne, Pennsylvania 19087
Thomas R. Cech, Ph.D.	University of Colorado, Boulder Boulder, Colorado 80309-0215
Richard T. Clark	One Merck Drive Whitehouse Station, New Jersey 08889-0100
Thomas H. Glocer	3 Times Square, 30 th Floor New York, New York 10036
Steven F. Goldstone	570 Lexington Avenue, 37 th Floor New York, New York 10022
William B. Harrison, Jr.	277 Park Avenue, 35 th Floor New York, New York 10172
Harry R. Jacobson, M.D.	3401 West End Avenue, Suite 300 Nashville, Tennessee 37203
William N. Kelley, M.D.	421 Curie Boulevard Philadelphia, Pennsylvania 19104-6160
Rochelle B. Lazarus	636 11 th Avenue New York, New York 10036
Carlos E. Represas	Av. Ejercito Nacional No. 453 Colonia Granada, 11520 Mexico, D.F. Mexico
Thomas E. Shenk, Ph.D	Washington Road Princeton, New Jersey 08544-1014
Anne M. Tatlock	One Merck Drive Whitehouse Station, New Jersey 08889-0100
Samuel O. Thier, M.D.	55 Fruit Street, Bulfinch 370 Boston, Massachusetts 02114-2606

Wendell P. Weeks

1 Riverfront Plaza
Corning, New York 14831

Peter C. Wendell

2884 Sand Hill Road, Suite 100
Menlo Park, California 94025

IN WITNESS WHEREOF, Merck & Co., Inc. caused this Restated Certificate of Incorporation to be duly executed as of November 2nd, 2009.

MERCK & CO., INC.

By: Celia A. Colbert

Name: Celia A. Colbert

Title: Senior Vice President, Secretary
and Assistant General Counsel

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
FILING CERTIFICATION (CERTIFIED COPY)

MERCK SHARP & DOHME CORP.

I, the Treasurer of the State of New Jersey,
do hereby certify, that the above named business
did file and record in this department the below
listed document(s) and that the foregoing is a
true copy of the
Certificate of Restated Incorporation
Filed in this office on November 2nd, 2009
as the same is taken from and compared with the
original(s) filed in this office on the date set
forth on each instrument and now remaining on file
and of record in my office.



Certificate Number: 115657458

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
2nd day of November, 2009

A handwritten signature in dark ink, appearing to read "R. David Rousseau", is written over a horizontal line.

R. David Rousseau
State Treasurer

State of New Jersey
Department of Environmental Protection
Manifest Section
CN 028, 401 East State Street
Trenton, New Jersey 08625-0028

NJX000332379
3-29-96

"Request to Deactivate EPA ID Number"

EPA ID No. NTD 986615102

Company Name: March Co., Inc. Whitehouse Station

Site Address: One March Drive, Whitehouse Station
(street) (city / town)
New Jersey 08889 49 4
(state) (zip code) (lot) (block)

Mailing Address: One March Drive Whitehouse Station
(street / p.o. box) (city / town)
New Jersey 08889
(state) (zip code)

Company Contact: LAURENCE D. BILLY 908-423-4909
(name) (area code and phone number)

Reasons for deactivating EPA ID No. (Check all appropriate boxes.)

☐ The EPA ID number was obtained for a one time cleanup which is completed.

☐ The site has completed an ECRA cleanup (indicate ECRA Case #_____).

☒ Other From a large quantity generator
to a small quantity generator

Is the site presently occupied? (circle yes or no)

Sign and date the application below, and retain the last page (pink copy) for your records.

LAURENCE D. BILLY
(printed name)

LAURENCE D. BILLY
(signature)

Deputy Regional Administrator
(title)

April 24 1996
(date)

Submission of false information is a violation of N.J.A.C. 7:26-5.6 and N.J.A.C. 7:26-7.3.

copies: White - Manifest Section
Yellow - USEPA Region II
Pink - Applicant

ND 5/10/96 1/2 - 1 N 10



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

09/30/91

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJD986615102

FACILITY NAME -> MERCK & CO INC

MAILING ADDRESS -> PO BOX 100
WHITEHOUSE STATION, NJ 08889

INSTALLATION ADDRESS -> 1 MERCK DR - OFF RTE 22 W
WHITEHOUSE STATION, NJ 08889

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: TORTORIELLO, WILLIAM
DIR FACIL ENGR
MERCK & CO INC
1 MERCK DR - OFF RTE 22 W
WHITEHOUSE STATION, NJ 08889

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



FedEx

United States Environmental Protection Agency

Notification of Regulated Waste Activity

Date Received
(For Official Use Only)

91-09-05

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

MJD9866L5L02

II. Name of Installation (Include company and specific site name)

M E R C K & C O . , I N C .

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

1 M E R C K D R I V E

Street (continued)

(D I R E C T L Y O F F R O U T E 2 2 W E S T)

City or Town

State

ZIP Code

W H I T E H O U S E S T A T I O N N J 0 8 8 8 9 -

County Code

County Name

H U N T E R D O N

IV. Installation Mailing Address (See instructions)

Street or P.O. Box

P . O . B O X 1 0 0

City or Town

State

ZIP Code

W H I T E H O U S E S T A T I O N N J 0 8 8 8 9 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

(first)

T O R T O R I E L L O W I L L I A M

Job Title

Phone Number (area code and number)

D I R O F F A C I L T Y . E N 9 0 8 - 5 3 4 - 5 9 6 4

VI. Installation Contact Address (See instructions)

A. Contact Address
Location Mailing

B. Street or P.O. Box



City or Town

State

ZIP Code

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner

M E R C K & C O . , I N C .

Street, P.O. Box, or Route Number

P . O . B O X 2 0 0 0

City or Town

State

ZIP Code

R A H W A Y N J 0 7 0 6 5 -

Phone Number (area code and number)

B. Land Type

C. Owner Type

D. Change of Owner
Indicator

(Date Changed)
Month Day Year

9 0 8 - 5 9 4 - 4 0 0 0 P P Yes No

Spoke with Karen 9/5/91 4:00 PM

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions.)

A. Hazardous Waste Activity		B. Used Oil Fuel Activities
<input type="checkbox"/> 1. Generator (See Instructions) <input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.) <input type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.) <input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.) <input type="checkbox"/> 2. Transporter (Indicate Mode in boxes 1-5 below) <input type="checkbox"/> a. For own waste only <input type="checkbox"/> b. For commercial purposes Mode of Transportation <input type="checkbox"/> 1. Air <input type="checkbox"/> 2. Rail <input type="checkbox"/> 3. Highway <input type="checkbox"/> 4. Water <input type="checkbox"/> 5. Other - specify _____	<input type="checkbox"/> 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions. <input type="checkbox"/> 4. Hazardous Waste Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketers <input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Underground Injection Control	<input type="checkbox"/> 1. Off-Specification Used Oil Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner - indicate device(s) - Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. EP Toxic (D000)	(List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div style="display: flex; justify-content: space-between;"> <div><input type="text"/></div> <div><input type="text"/></div> <div><input type="text"/></div> <div><input type="text"/></div> <div><input type="text"/></div> <div><input type="text"/></div> <div><input type="text"/></div> <div><input type="text"/></div> </div>

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)


1	2	3	4	5	6
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	8	9	10	11	12
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1	2	3	4	5	6
X 0 0 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature 	Name and Official Title (type or print) JOHN HIGGINS, DIR., FCLTY. OPS	Date Signed 9/4/91
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XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses)